

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET Substitute for Form PTO-1360 (For use with Form PTO/SB/06)								Application Number 09/728732		Filing Date		
								Applicant(s)				
								* May be used for additional claims or amendments				
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT							
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1												
2												
3												
4												
5												
116	1											
117		1										
118		1										
119												
120		1										
121		1										
122		1										
123	1											
124		1										
125		1										
126		1										
127		1										
128		1										
129												
130	1											
131												
132												
133												
134												
135												
136												
137												
138												
139	1											
140												
141		5										
142		5										
143		5										
144		5										
145	1											
146												
147		1										
148		1										
149												
150		1										
151		1										
152		1										
153		1										
154		1										
155		1										
156		1										
157		1										
158		1										
159		1										
160		1										
Total												
Indep												
Depend												
Total												
Claims												

161												
162	1											
163		1										
164		1										
165		1										
166		1										
167												
168												
169												
170												
171												
172												
173												
174												
175												
176												
177												
178												
179												
180												
181												
182												
183												
184	1											
185		1										
186		1										
187		2										
188		1										
189		1										
190		1										
191		1										
192		1										
193		1										
194		1										
195		1										
196	1											
197	1											
198		2										
199		2										
200												
201												
202												
203												
204												
205												
206												
207												
208												
209												
210												
Total												
Indep	10											
Depend	53											
Total	63											
Claims												

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

BEST AVAILABLE COPY